



REQUEST FOR INFORMATION

Please Note: A \$5.00 application fee is required for all requests. Cash payments must be made in person. Completed forms must be forwarded to: Privacy Officer, India Rainbow Community Services of Peel, 3038 Hurontario St., Suite 206, Mississauga, ON, L5B 3B9 or emailed to privacy@indiarainbow.org

Request for: Access to Own Personal Information Correction to Own Personal Information

Preferred method of access to records: Receive Copy Examine Original (appointment required)

Last Name **First Name**

Address

City **Province** **Postal Code**

Phone # **Alternative Number (optional)**

E-mail (optional)

If request is for access to, or correction of, own personal information records:
 Name appearing on records: same as above or commonly known as:

Detailed description of requested records, personal information or personal information to be corrected.

Note: If you are requesting a correction of personal information, please indicate the desired correction, and if appropriate, attach any supporting documentation. Proof of identity may be required.

Signature: **Date:** (yyyy/mm/dd)

For Office Use Only

Date Received: _____	ID Verified: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Fee Collected: \$: _____ <input type="checkbox"/> Cheque <input type="checkbox"/> Cash Information Released on: _____
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This form will be kept for 6 years from the date of completion. Personal information contained on this form is collected under the Freedom of Information and Protection of Privacy Act or Municipal Freedom of Information and Protection of Privacy Act and will be used to answer your request. Questions about this collection should be directed to the Privacy Officer.